

DEPARTMENT OF HEALTH SERVICES

714/744 P STREET

P.O. BOX 942732

SACRAMENTO, CA 94234-7320

(916) 322-1478



March 8, 1993

CMSP Letter 93 - 4

TO: All CMSP County Welfare Directors

SUBJECT: COUNTY MEDICAL SERVICES PROGRAM ELIGIBILITY MANUAL
REVISION

Enclosed you will find two (2) copies of a revision to the County Medical Services Program (CMSP) Eligibility Manual. Please reproduce sufficient copies of this revision and place them in existing copies of the CMSP Eligibility Manual.

current revision impacts:

- Section 0747(f) - Removes the requirement for the counties to report to the State Department of Health Services, the issuance of duplicate cards to providers.

Counties should note that they are still required to provide Proof of Eligibility (POE) to eligible providers as detailed in the CMSP Eligibility Manual, Section 0747.

If you should have any questions on this revision, please contact Mr. Albert Cooper, of the County Medical Services Program, at (916) 322-1615.

Sincerely,

A handwritten signature in black ink that reads 'Jim Martinez'.

Jim Martinez, Chief
County Medical Services Program

CMSP Contact Persons

Mr. Albert Cooper
County Medical Services Program
Department of Health Services
714 P Street, Room 523
Sacramento, CA 95814

CMSP ELIGIBILITY MANUAL

(f) If the beneficiary was not eligible in your county on the identified date(s) of service, the provider's request may be denied by the county and returned to the hospital.

(g) The county should process provider requests chronologically, working the oldest first, and shall limit retroactive card issuance to twelve (12) months.

(h) If a CMSP card is requested for a beneficiary whose eligibility was established subsequent to the date of service, a separate note should be sent to the provider, indicating that the case involves retroactively determined eligibility and identifying the date eligibility was established. This notation will assist the provider in the processing of Treatment Authorization Requests (TARs) when needed.

(i) If the date of service is ten (10) to twelve (12) months retroactive from the date the county is processing the request for a replacement card, the following procedures apply:

(1) Issue the hospital provider a duplicate CMSP card each month of service in which the beneficiary was eligible.

(2) Issue a letter to the provider each month of service to authorize a billing which may occur sixty (60) days beyond the one-year limitation period.

(j) Note that duplicate CMSP cards can be requested through Medi-Cal Eligibility Data System (MEDS) only if the date of service is within the MEDS Eligibility History file.

0749. Control of County Issued CMSP Cards.

(a) The county department shall record every CMSP card issued or voided by the county department on the control log for MC 301, form HAS 2007.

(b) The county department may, with department approval a substitute for form HAS 2007.